

SOS: Signs of Suicide

Brief Program Description

One of the most serious health problems facing young people in the United States is suicide. Data from the National Center for Health Statistics indicate that the suicide rate for youth and young adults aged 15-24 years has tripled since 1950, and suicide is now the third leading cause of death in this age group. SOS: Signs of Suicide is a relatively new approach to reducing the incidence of suicide among adolescents. SOS is a school-based prevention program that incorporates two prominent suicide prevention strategies into a single program, combining a curriculum that aims to raise awareness of suicide and its related issues with a brief screening for depression and other risk factors. The educational component is expected to reduce suicidality by increasing students' understanding of and promoting more adaptive attitudes toward depression and suicidal behavior. The self-screening component enables students to recognize depression and suicidal thoughts and behaviors in themselves and prompts them to seek assistance.

SOS educates students to understand that suicide is directly related to mental illness, typically depression, and that it is not a normal reaction to stress or emotional upset. SOS is unique in that other suicide prevention programs seek to de-stigmatize, and therefore normalize suicide by separating it from mental illness. A crucial component of SOS is promoting the understanding that suicide is a feature of mental illness and is, in fact, a part of the diagnostic criteria for major depressive disorder.

Program Strategies

The basic message of SOS is to teach high school students to respond to the signs of suicide as a mental health emergency, much as one would react to a heart attack as a health emergency. Students are taught to recognize the signs of suicide and depression in themselves and others and the specific action steps needed to respond to those signs. The goal of the SOS program is to make the action step—ACT—as instinctual a response as the Heimlich maneuver and as familiar an acronym as "CPR". The acronym ACT stands for Acknowledge, Care, and Tell. First, one must "acknowledge" the signs of suicide that others display and take them seriously. Next, one must let the person know that you "care" about them and that you want to help. Lastly, youth are instructed to "tell" a responsible adult.

The program's main teaching materials are a video (featuring dramatizations depicting the signs of suicidality and depression, recommended ways to react to someone who is depressed and suicidal, as well as interviews with real people whose lives have been touched by suicide) and a discussion guide. Students are also asked to complete the Columbia Depression Scale, a brief screening instrument for depression.

Population Focus

Participants were high school students in rural, suburban, and urban areas.

Suitable Settings

The intervention is suitable for a school setting.

Required Resources

The video, Friends for Life: Preventing Teen Suicide and a discussion guide are required.

Implementation Timeline

The average amount of time to implement the program across 376 schools was approximately 2.5 days, although almost 40% of schools reported that they completed the program in one day.

Outcomes

Results of a multi-site evaluation revealed:

- The average number of youth seeking counseling for depression/suicidality in the 30 days following the program (9.59) was significantly higher when compared with the average number of youth seeking help per month over the past year (3.93). This was an increase of almost 150%.
- There was a 70% increase in the average number of youth seeking counseling for depression/suicidality on behalf of a friend in the 30 days following the program (3.79) when compared with the average number of youth seeking help for a friend per month over the past year (2.25).
- The average number of youth seeking counseling for depression/suicidality remained high in the 3 months following the program (9.74) per month, and was significantly higher when than the average number per month during the previous school year of youth seeking help per month over the past year (3.93). In addition, there was a 25% increase in the number of youths seeking help for a friend 3 months after implementation (2.78) when compared to the average number of youth per month seeking help for a friend over the past year (2.25).

Contact Information

For indepth information on this program, please use the contact listed below.

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